0002

1000 MILWAUKEE AVENUE GLENVIEW, IL 60025 Phone: 866-283-7122 Fax: 847-953-5390

## **AON RISK SERVICES**

INCOMENG

201

1/007/006

# Fax

To:	Risk Manager	From:	Aon Client Services (dxl)
Company:	State of Utah	Date:	Tuesday, January 06, 2004
Fax:	801-359-3940	Pages:	4 (including Cover Sheet)
CC:	Mary Wong	CC:	
Company:		Company:	
Fax:	410-689-7531	Fax:	
Client	RAG American Coal -	Certificate(s) of I	nsurance   Auto ID Card(s)

#### ·Comments:

Attached, please find your proof of coverage document(s) as requested. Have a great day!

**Aon Client Services** 

**RECEIVED** 

JAN 0 6 2004

DIV. OF OIL, GAS & MINING

#### SIGNATURE SERVICE

CONFIDENTIALITY NOTICE: The materials enclosed with this facsimile transmission are private and confidential and are the property of the sender. The information contained in the material is privileged and is intended only for the use of the individual (s) or entity (ies) named above. If you are not the intended recipient, be advised that any unauthorized disclosure, copying, distribution or taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this facsimile transmission in error, please immediately notify us by telephone to arrange for return of the forwarded documents to us.

# Certificate of Insurance

premie 1007/0038

To: State of Utah

Division of Oil, Gas and Mining 1594 West North Temple, Suite 1210

P.O. Box 145801

Salt Lake City, UT 84114-5801

Re:

Willowcreek Mine

Permit No. ACT/007/038

Assured:

RAG American Coal Holding, Inc. et al

999 Corporate Blvd.

Linthlcum Heights, MD 21090

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described havein is subject to all the terms, exclusions and certificate of such policies. Limits shown may have been reduced by paid claims.

Type of insurance	Policy No.	Policy Period		Policy Limits/Values
Commercial General Liability	ICH GL 137-04	01/01/04 — 01/01/05		Products/Completed Operations Aggregate Personal and Advertising Injury Each Occurrence Fire Damage (Any One Fire)
Insurance Company(les)	Insurance Company(les) Insurance Corporation of Hanover			
Automobile Liability	AS2-641-004364-114	01/01/04 01/01/05	\$ 1,000,000	CSL Each Occurrence
Insurance Company(les)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 <b>-</b> 06/30/04		y EL: Each Accident Disease — Policy Limit
				Disease - Each Limit
Insurance Company(les)	Old Republic Insura	nce Company	_	
Excess Liability	ICH CU 231-04	01/01/04 - 01/01/05		ach Loss and in the aggregate excess scheduled underlying.
Insurance Company(les)	Insurance Corporation o	f Hanover		

General Liability and Automobile Liability Include a blanket additional Insured where required by written contract, but subject to the policy terms and conditions. General Liability policy includes X, C, U coverage.

RECEIVED

JAN 0 6 2004

DIV. OF OIL, GAS & MINING

The supectibing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscripting insurers are not responsible for the subscription of any reason does not satisfy all or part or its obligations.

This certificate is issued as a matter of information only and confers no rights upon the particular holder. This certificate does not smend, extend or after the coverage afforded by the policytics) shown horser. Should any at the above described policies as canceled before the expiration date thereof, this agency, on behalf of the issuing companyities), will exceeded the first as days written notice to the above named conflicate holder, but failure to mail such notice shall impose no obligation or flability of any kind upon the companyities) or this agency.

Aon Risk Services of Illinois, Inc.

Date:	January 6, 2004	Ву:	Fit Mail	
Date:	January 5, 2004	Ву:		_

1007/006

Certificate of Insurance

Star Point #1 & #2 Mine

Permit No. ACT/007/006

To: State of Utah

Division of Oil, Gas and Mining 1594 West North Temple, Suite 1210 P.O. Box 145801

Salt Lake City, UT 84114-5801

Assured: RAG

RAG American Coal Holding Inc. et al

999 Corporate Blvd.

Linthicum Heights, MD 21090

This is to callly that the policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanting any requirement, term, or condition of any contact or other decument with respect to which this certificate may be lessed or may pertain. The insurance attended by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by peld claims.

Type of Insurance	Policy No,	Policy Period		Policy Limits/Values
Commercial General Lizbility	ICH GL 197-04	01/01/04 — 01/01/05	\$ 6,000,000 \$ 6,000,000	Products/Completed Operations Aggregate
				Each Occurrence Fire Damage (Any One Fire)
Insurance Company(lee)	Insurance Corporation of Hangver			
Automobile Liability	A\$2-641-004364-114	01/01/04 — 01/01/05	\$ 1,000,000	CSL Each Occurrence
Insurance Company(les)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 <b>-</b> 06/30/04	WC Statutory	y EL:
, .			V . , ,	Each Accident
				Disease – Policy Limit Disease – Each Limit
Insurance Company(les)	Old Republic Insura	nce Company		
Excess Liabilly	ICH CU 231-04	01/01/04 - 01/01/05		ach Loss and in the aggregate excess scheduled underlying.
Insurance Company(les)	insurance Corporation of	of Hanover		

General Liability and Automobile Liability include a blanket additional insured where required by written contract, but subject to the policy terms and conditions. General Liability policy includes X, C, U coverage.

RECEIVED
JAN 0 6 2004

DIV. OF OIL. GAS & MINING

The subscribing insurers' opligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscribing. The subscribing insurers are not responsible for the subscribing insurer who for any reason does not existly all or pain of its obligations.

This certificate is liability as a matter of information only and confers no rights upon the continuite holder. This certificate does not amend, extend or after this coverage alterded by the policytest shown hereon. Should any of the above described policies to cancelled before the expiration date thereof, this agency, on behalf of the isability companyties), will endeemed to mail 45 days written notice to the above named certificate holder, out failure to mail such holder shell impose no colligation or liability of any kind upon the companyties) or this agency.

Aon Risk Services of Illinois, Inc.

Date: January 6, 2004

By:

### Certificate of Insurance

To: State of Utah

Division of Oil, Gas and Mining 1594 West North Temple, Suite 1210

P.O. Box 145801

Salt Lake City, UT 84114-5801

Assured:

RAG American Coal Holding, Inc. et al including Castlegate Holding Company

999 Corporate Blvd. Linthicum Heights, MD 21090 Re:

Castle Gate Mines

Permit No. ACT/007/004, Folder No. 4

Carbon County, Utah

This is to certify that this policies of insurance listed below have been issued to the insured named above for the policy period indicated, notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may perials. The inturance afforded by the policies described harein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

Type of Insurance	Policy No.	Policy Period	Policy <u>Limits/Values</u>	
Commercial General Liability	ICH GL 137-04	01/01/04 — 01/01/05	\$ 6,000,000 General Aggregate \$ 6,000,000 Products/Completed Operations Aggregate \$ 1,000,000 Personal and Adventions \$ 1,000,000 Fire Damage (Any On Medical Expense (Any Person)	eing Injury ne Fire)
Insurance Company(les)	pany(les) insurance Corporation of Hanover			
Automobile Liability	AS2-641-004964-114	01/01/04 — 01/01/05	\$ 1,000,000 CSL Each Occurrence	€
Insurance Company(les)	Liberty Mutual Fire			
Worker's Compensation Employer's Liability	OC 017049-06	06/30/03 — 06/30/04	WC Statutory EL:	
			\$1,000,000 Each Accident \$1,000,000 Disease Policy Limit \$1,000,000 Disease Each Limit	
Insurance Company(les)	Oid Republic Insurar	nce Company		
Excess Liability	ICH CU 231-04	01/01/04 — 01/01/05	\$1,000,000 Each Loss and in the as as per Form, excess scheduled und	

Insurance Company(les) Insurance Corporation of Hanover

General Liability and Automobile Liability include a blanket additional insured where required by written contract, but subject to the policy terms and conditions. General Liability policy includes X, C, U coverage.

DIV. OF OIL CARE Senting insurers obligations under contracts of insurance to which they subscribe are several and not joint and are limited socially of the Senting of pair included subscriptions. The subscribing insurers are not responsible for the subscription of any outsubscribing insurer with for any reason does not satisfy all or pair or his observations.

This certificate is issued as a matter of information only and conters no rights upon the certificate holder. This certificate dues not amend, extend or after the coverage afforded by the policytest abuve horsest. Should any of the above described policies to expected before the appriation date thereof, this agency, on behalf of me issuing company(se), will endeave-te mail 4d days winten notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or flability of any kind upon the company(se) or rite agency.

Aon Risk Services of Illinois, Inc.

Date: January 6, 2004

By:

The Stand